Summary of Benefits Report for Mississippi, Medicaid InsureKidsNow.gov

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Preventive Servic	es				
	Is the service Covered?	Frequency	List any service - specific limitations		
Cleanings	Yes	1 x 6 months	Age 0-20		
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months	Age 0-20		
Sealants (list any tooth-specific limits)	Yes	1 x every 5 years	Age 0-20, newly erupted first and second molars or first and second pre-molars		
Space maintainers	Yes		Age 0-20		
Diagnostic Servic	es				
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?	
Oral health screening or assessment	No				
Dental examinations	Yes	1 x 6 months	Age 0-20	6 mths	
Assessment of risk for tooth decay	No				
X-Rays				I	
Bitewing	Yes		Age 0-999		
Full Mouth	Yes	1 x every 2 years	Age 0-999		
Panoramic	Yes	1 x every 2 years	Age 0-999		
Treatment Service	es				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage	
Anti-microbial treatments that stop decay from spreading	No				
Fillings					
Silver amalgam	Yes		Age 0-20		
Tooth colored composite	Yes		Age 0-20		
Crowns/tooth caps					
Stainless steel crowns	Yes		Age 0-20		
Metal (only) crowns	No				
Metal/porcelain crowns	Yes - only with prior authorization		Age 0-20, permanent anterior teeth		
Porcelain (only) crowns	Yes - only with prior authorization		Age 0-20, permanent anterior teeth		
Root Canals (endodo	ntics)				
Root canals on baby teeth (pulpotomies)	Yes		Age 0-20		
Root canals on permanent teeth	Yes		Age 0-20, one per lifetime per tooth		
Gum (periodontal) therapy	Yes		Age 10-20, one x per quadrant per SFY, covered for non-EPSDT beneficiaries if on Dilantin therapy		
Dentures				T	
Partial dentures	Yes - only with prior authorization		Age 0-20, covered only when teeth are congenitally missing		

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Treatment Services						
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Complete dentures	Yes - only with prior authorization		Age 0-20, covered only when teeth are congenitally missing			
Bridges	No					
Orthodontics*						
Retainers (orthodontic)	Yes - only with prior authorization		Age 0-20, once per lifetime			
Braces	Yes - only with prior authorization		Age 0-20,			
Oral surgery						
Simple extractions	Yes		Age 0-999,			
Surgical extractions	Yes		Age 0-999,			
Care of abscesses	Yes		Age 0-999, palliative (emergency) treatment			
Cleft palate treatment	Yes - only with prior authorization		Age 0-20			
Cancer treatment	No					
Treatment of fractures	Yes - only with prior authorization		Age 0-20, when medically necessary			
Biopsies	Yes - only with prior authorization		Age 0-999			
Treatment of jaw joint problems (TMJ)	Yes - only with prior authorization		Age 0-20	when medically necessary		
Emergency room services provided by a dentist	Yes		Age 0-999			
Inpatient Hospital Services	Yes - only with prior authorization		Age 0-999			
Anesthesia						
General anesthesia	Yes - only with prior authorization		Age 0-999			
Intravenous conscious sedation	Yes - only with prior authorization		Age 0-999			
Non-intravenous conscious sedation	Yes - only with prior authorization		Age 0-999			
Analgesia (nitrous oxide)	Yes - only with prior authorization		Age 0-999			

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^{*} When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).